

**FEC  
FORM 1****STATEMENT OF  
ORGANIZATION**

Office Use Only

1. NAME OF COMMITTEE (in full) ☐ (Check if name is changed) Example: If typing, type over the lines.

12FE4M5

California Water Service Group Political Action Committee

ADDRESS (number and street)

621 Capitol Mall, Suite 2500

☐ (Check if address is changed)

Sacramento

CITY ▲

CA

STATE ▲

95814

ZIP CODE ▲

COMMITTEE'S E-MAIL ADDRESS

☐ (Check if address is changed)

dhuck@nossaman.com

Optional Second E-Mail Address

COMMITTEE'S WEB PAGE ADDRESS (URL)

☐ (Check if address is changed)

N/A

2. DATE

06 / 16 / 2021

3. FEC IDENTIFICATION NUMBER ►

C C00357608

4. IS THIS STATEMENT ☐ NEW (N) OR ☒ AMENDED (A)

I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer , Justin Skarb, , ,

Signature of Treasurer , Justin Skarb, , ,

[Electronically Filed]







Date

06 / 15 / 2021

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to the penalties of 2 U.S.C. §437g.

ANY CHANGE IN INFORMATION SHOULD BE REPORTED WITHIN 10 DAYS.

Office  
Use  
OnlyFor further information contact:  
Federal Election Commission  
Toll Free 800-424-9530  
Local 202-694-1100**FEC FORM 1**  
(Revised 06/2012)

1.  FEC ID number 
2.  FEC ID number 
3.  FEC ID number 
4.  FEC ID number 

Write or Type Committee Name

**California Water Service Group Political Action Committee****6. Name of Any Connected Organization, Affiliated Committee, Joint Fundraising Representative, or Leadership PAC Sponsor**

California Water Service Company

Mailing Address

1720 North First Street

San Jose

CITY

CA

STATE

95112

ZIP CODE

Relationship: ☒ Connected Organization ☐ Affiliated Committee ☐ Joint Fundraising Representative ☐ Leadership PAC Sponsor**7. Custodian of Records:** Identify by name, address (phone number -- optional) and position of the person in possession of committee books and records.

Full Name

Fung, Julia, , ,

Mailing Address

1720 North First Street

San Jose

CITY

CA

STATE

95112

ZIP CODE

Title or Position

Custodian of Records

Telephone number

408

367

8200

**8. Treasurer:** List the name and address (phone number -- optional) of the treasurer of the committee; and the name and address of any designated agent (e.g., assistant treasurer).Full Name  
of Treasurer

Skarb, Justin, , ,

Mailing Address

1720 North First Street

San Jose

CITY

CA

STATE

95112

ZIP CODE

Title or Position  
Treasurer

Telephone number

310

257

1485

Full Name of  
Designated  
Agent

Huck, Dawn E., , ,

Mailing Address

621 Capitol Mall, Suite 2500

Sacramento

CITY

CA

STATE

95814

ZIP CODE

Title or Position

Assistant Treasurer

Telephone number

916

442

8888

9. **Banks or Other Depositories:** List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.

Name of Bank, Depository, etc.

First Foundation Bank

Mailing Address

1601 Response Road, Suite 190

Sacramento

CITY

CA

STATE

95815

ZIP CODE

Name of Bank, Depository, etc.

Mailing Address

CITY

STATE

ZIP CODE